

CVS-MDL-02487



SJHC TOD MINOR EMERGENCY  
DEPARTMENT  
Phone: 330-306-5040  
Fax:  
1296 Tod Avenue  
Warren OH 44485

Date: Sep 22, 2012

Patient Name: Protected Health Information

Date of Birth: 1977

Address: Protected Health Information

Protected Health Information

Home Phone: Protected Health Information

**Allergies: Penicillins; Tetracyclines; Tramadol**

Rx: HYDROcodone-acetaminophen (VICODIN) 5-500 MG per tablet

Route:

Qty: \*20 (Twenty) tablet\*

Refill: \*0 (Zero)\*

Sig: Take 1 PO Q 6 hrs PRN pain on top of Naprosyn.

Order Comments:

Ordering Agent:

John L. Baumeier, DO

Write Dispense As Written

  
John L. Baumeier, DO  
NPI: 1780632562

DEA #: BB1918157

Sep 22, 2012

Order Class: Print

Child Resistant Container? Y N

Valid for controlled substances only

Ordered at 11:37 AM on 9/22/2012

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Protected Health Information

Standard Register



\*EDITED\* 09/23/2012 13:22



Protected Health Information

HYDROCODONE-ACETAMINOPHEN 5-500

MAY 1997

2010-03-05

08/08/05-05

TABLET BY MOUTH

EVERY 6 HOURS AS NEEDED

FOR PAIN ON TOP OF

NAPROSYN

BRUNIER, JOHN

1950 NILES CORTLAND RD NE

WARREN, OH 44484

(330) 858-4151

BB1918157

RE: 09/23/2012 TIME 13:22 DET: RJ

OAKES checked  
new pt & also  
note to watch pt  
w/ controls

Standard Register

